

County of Los Angeles – Department of Mental Health
Service Area 3

Quality Improvement Committee Meeting

May 21, 2014

9:30 am – 11:30 am

AGENDA

- | | | |
|-----|--|-------------------|
| I | Welcome and Introductions | Bertrand Levesque |
| II | Review of the Minutes | Bertrand Levesque |
| III | Family Engagement & Inclusion Project | Mary Crosby |
| IV | Presentation-Family Engagement & Inclusion | Helena Ditko |

Quality Improvement

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|-----|------------------------------|----------------|
| I | EQRO | Gassia Ekizian |
| II | Cultural Competency | Gassia Ekizian |
| III | Clinical Quality Improvement | Gassia Ekizian |
| IV | Patient Right Office | Gassia Ekizian |
| V | Policy Updates | Gassia Ekizian |
| VI | Test Calls | Mary Crosby |

Quality Assurance Liaison Meeting

- | | | |
|-----|------------------------------------|-------------------|
| I | Health Information Management(HIM) | Gassia Ekizian |
| II | Plan Development | Gassia Ekizian |
| | | Bertrand Levesque |
| III | IBHIS | Gassia Ekizian |
| | | Bertrand Levesque |

Other Issues

- | | | |
|----|---------------|-------------------|
| I | Announcements | All |
| II | Adjournment | Bertrand Levesque |

**Next Meeting: June18, 2014 at Enki, 3208 Rosemead Blvd
2nd Floor, El Monte, Ca**

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
Service Area 3
Quality Improvement Committee Meeting
May 21, 2014

<i>Judy Law</i>	<i>Alma</i>		<i>Beth Foster</i>	<i>Hillsides</i>
<i>Susan Lam</i>	<i>Almanson</i>		<i>Kevin Minor</i>	<i>Homes for Life</i>
<i>Makan Emadi</i>	<i>Arcadia MH</i>		<i>Poonam Natha</i>	<i>Leroy Haynes Center</i>
<i>Sharon Scott</i>	<i>Arcadia MH</i>		<i>Maelisa Hall</i>	<i>Maryvale</i>
<i>Lucia Lopez-Plunkett</i>	<i>Bienvenidos</i>		<i>Karla Martinez</i>	<i>Maryvale</i>
<i>Leslie Shrager</i>	<i>Children's Bureau</i>		<i>Gabriela Rhodes</i>	<i>McKinley</i>
<i>Erin Grierson</i>	<i>Crittenton</i>		<i>Vivian Chung</i>	<i>Pacific Clinics</i>
<i>Greg Tchakmakjian</i>	<i>DMH</i>		<i>D. Chavez</i>	<i>Prototypes I-CAN</i>
<i>Mary Crosby</i>	<i>DMH</i>		<i>Jennifer Lomas</i>	<i>PUSD</i>
<i>Elizabeth Townsend</i>	<i>DMH</i>		<i>Diana Scott</i>	<i>Rosemary</i>
<i>Nikki Dorsey</i>	<i>DMH</i>		<i>Rebecca deKeyser</i>	<i>San Gab. Children's</i>
<i>Nancy Uberto</i>	<i>D'Veal</i>		<i>Nely Meza-Andrade</i>	<i>SPIRITT</i>
<i>Michelle Hernandez</i>	<i>ENKI</i>		<i>Anna Milholland</i>	<i>The Family Center</i>
<i>Windy Luna-Perez</i>	<i>Ettie Lee</i>		<i>Natalie Majors</i>	<i>Tri-City MH</i>
<i>Tammie Shaw</i>	<i>Five Acres</i>		<i>Lisa Tran</i>	<i>Tri-City MH</i>
<i>Gassia Ekizian</i>	<i>Foothill Family</i>		<i>Jason Herrera</i>	<i>Trinity</i>
<i>Stella Tam</i>	<i>Heritage Clinic</i>		<i>Rosemary Flores</i>	<i>Trinity</i>

WELCOME

Dr. Greg Tchakmakjian welcomed the group, followed by self-introductions.

REVIEW OF THE MINUTES

The minutes were reviewed and accepted by Lisa Tran, second by Vivian Chung, with one correction: Makan Emadi from Arcadia was present at the last meeting (4/16/2014).

FAMILY ENGAGEMENT & INCLUSION PROJECT

Mary Crosby requested members to complete a survey before the start of the presentation as a Pre-test.

PRESENTATION-FAMILY ENGAGEMENT & INCLUSION

Helena Ditko presented on Family Engagement & Inclusion in treatment services. The following concepts were presented:

- The need and purpose for Family Engagement and Inclusion
- Family Inclusion during Assessment, Treatment Planning, and Treatment
- Family/Client Choice for Inclusion & HIPAA/PHI

QUALITY IMPROVEMENT

EQRO: EQRO audit is completed, and the process was smooth. Auditors are gathering the preliminary information for a report to come out soon.

Cultural Competency: Please see hand out on “Definition of “Culture”. This definition is useful in knowing what aspects of culture should be address in documentation.

Cultural Competency Meetings are held every 2nd Wednesday of the month 695 Vermont, 10th Floor. Contact: Sandra Chang-Ptasinski (schang@dmh.lacounty.gov • (213) 251-6851). The next meeting is June 11, 2014 from 1:30-3:30. LGBTQ Work Group meetings are held every 4th Wednesday of the

month. The next meeting is scheduled for April 23, 2014 from 10:00 – 12:00 at 695 Vermont, 16th floor conference room. Members were encouraged to attend, as more Service Area 3 representation is needed at both meetings.

Clinical Quality Improvement: Per the Office of the Medical Director, the Peer Review for psychiatrists at directly operated sites is still in process. Additionally, online incident reporting is in the process of implementation. Directly operated sites will begin using this in July, and contractors later. Contract providers will be asking to report who will be the contact person for their agency.

Patient Rights Office: The DMH Warehouse is closed until new fiscal year. New order will be taken, but will remain unfilled until at least 7/1/2014. In order to cut costs, there will be some changes to the process and to materials provided by warehouse (i.e. staples vs binding & deliver vs pick-up).

Policy Updates: The policy updates document has a new format. Please remember that all policies can be access on the DMH website. Please see handout.

Tests Calls: Access Center test calls are occurring again. Mary Crosby and Gassia Ekizian asked for volunteers who could make at least 1 non crisis call after hours (6pm – 8pm) during the testing week of June 15, 2014 – June 21, 2014. Ten Service Area 3 members volunteered to fill all needed test call slots (5 English/5 Non-English). Test call forms should be return to Mary Crosby, in person, or by mail. If there are any questions regarding test calls, please contact Mary Crosby or Bertrand Levesque. If anyone is interested in viewing the report from the last test call review, please visit the QI website for the survey results.

QUALITY ASSURANCE LIAISON MEETING

HEALTH INFORMATION MANAGEMENT (HIM): H.I.M. (a department at DMH), is working on a procedure to request electronic data for directly operated. This process will be coming out soon.

PLAN DEVELOPMENT: The will be a bulletin disseminated soon with clarification regarding Plan Development (H0032) – Mental Health vs. Targeted Case Management. In brief, the procedure code that is billed should be based on the nature of service that is being planned.

IBHIS: The concept of “multiple episodes” is being replaced by a “single episode” for each client, per Legal Entity. Each Legal Entity will have 1 episode number per client. Inpatient will stay the same and will have a Legal Entity number for each program. It is important to understand the difference between of the numbers: Program Admission number, which is the Legal Entity Number, and Program of Service number, which is the Provider Number.

QA Procedures: Please remember that in the near future, DMH QA will be asking for agencies’ written QA procedures.

OTHER ISSUES

Announcements: NONE

Adjournment: Meeting was adjourned at 11:13 a.m.

Minutes recorded by: Natalie Majors-Stewart, Tri-City Mental Health

Minutes approved by: Greg Tchakmakjian and Gassia Ekizian
Quality Improvement Committee

Next Meeting: June 18, 2014 (9:30 a.m. - 11:30 a.m.)
ENKI, 3208 Rosemead Blvd., 2nd Floor, El Monte, CA 91731.